

## UPDATES TO INTERPRETATIVE GUIDE LICENSED CHILD CARE CENTER

The Interpretive Guidelines are intended to clarify compliance expectations for child care providers and for BCC staff. Items in this document **are highlighted** because they have been updated in the Licensed Child Care Center Interpretive Guidelines. Changes below are listed in page number order. All changes have been inserted into the full Licensed Child Care Center Interpretive Guidelines document posted on this website.

### UPDATE #1 – Page 10

(56) “Potentially hazardous food” means any food that consists in whole or in part of milk or milk products, eggs, meat, poultry, fish, shellfish, edible crustacea, or other ingredients, including synthetic ingredients, in a form capable of supporting rapid and progressive growth of infectious or toxigenic micro-organisms. The term does not include foods that have a pH level of four and six-tenths (4.6) or below or a water activity (aw) value of eighty-five hundredths (0.85) or less under standard conditions or food products in hermetically sealed containers processed to prevent spoilage and as defined in **410 IAC 7-24-59 or most current rule.**

### UPDATE #2 - Page 102

#### ■ 470 IAC 3-4.7-82 Special diets

##### ♦ Intent:

To ensure that dietary modifications for any child, including those with special health care needs, developmental problems of chewing and swallowing food and food allergies are carefully monitored by a trained health professional, coordinated with the rest of the child’s health care and documented in the child’s record. Detailed information on a child’s special diets is invaluable to the Center food service staff in meeting the nutritional needs of the child. Parents shall provide a written **statement** for special diets due to personal or religious reasons.

### UPDATE #3 - Page 103-104

#### 470 IAC 3-4.7-83 Vendor service

Authority: IC 12-13-5-3

Affected: IC 12-17.2-4

Sec. 83. (a) Each center using vendor service shall have a written contract as follows:

(2) The contract must assure that the vendor’s food service business, food handlers, and all premises are inspected and approved by local health authorities

##### ♦ Intent:

**Delete: To clarify that centers that vend from themselves where food is prepared in a facility that does not provide child care shall have a vendor’s permit or be inspected and approved by the Division.**

**Insert with:** A center that vends (obtains prepared meals and / or snacks from outside of its own facility must have a copy of the current contract with the vendor or written procedure if self-vending. Self-vending is defined as "vending from off site self-owned kitchen."

**UPDATE #4 - Pages 103, 104, 120, 133, 134, 135, 150**

Regarding "*Retail Food Establishment Sanitation Requirements*," replace all references to 410 IAC 7-20 with **410 IAC 7-24 or most current rule**

**UPDATE #5 - Page 128**

■ **470 IAC 3-4.7-108 Doors**

♦ Intent:

To ensure that the Center is in compliance with applicable rules of the FPBSC for exit doors and door locks and latches. Further to prevent children from being locked in a room and **to ensure that doors can be opened by staff.**

○ Assessment Method:

- **Child bathroom door locks shall be designed to permit opening a locked door from the outside in an emergency. The opening device shall be readily accessible to the staff**
- **Additionally, every interior door shall be such that children can open the door from the inside.**
- **Manually operated flush bolts, surface bolts, eye hooks and/or any other latching/locking device installed on the door are not permitted**

**UPDATE #6 – Page 148**

■ **470 IAC 3-4.7-135 Infant food preparation and storage**

(d) There shall be a heating unit for warming bottles and food, accessible only to staff, located in the infant room. Staff shall not heat formula or breast milk in a microwave oven.

♦ Intent:

**To clarify that the center can use hot running water to warm the bottles in the infant room.**

**UPDATE #7 - Page 165**

■ **IC 12-17.2-4-3.5**

**Drug testing**

○ Assessment Method:

Review drug testing documentation for all caregivers and volunteers working as caregivers. **The Licensed Center Substance Abuse Screening Test Consent Form shall be in each staff file along with a copy of the drug test results. Licensees shall follow the 7/1/2003 established Licensed Child Care Center Drug Testing Guidelines. Drug test results shall be reviewed and signed by a Medical Review Officer (MRO) and the chain of custody shall be followed as outlined in the Guidelines. Electronic signatures are acceptable.**

**For initial applications, drug tests are good for 60 days prior to application received date**